

TWGFEX MEMBERSHIP APPLICATION

Technical Working Group for Fire and Explosive, University of Central Florida, P.O. Box 162367 Orlando, Florida 32816-2367
Phone: (407) 823-6469 Fax: (407) 823-3162 Email: natlctr@mail.ucf.edu

For your convenience you can fill out the application digitally or simply print the application and fill it out

Print Full Name:		
Employer's name:		
Mailing address:		State:
Zip:		
Phone #: () 	Fax #: () 	E-mail:
Professional Experience (Three years professional experience in fire or explosive matters required for membership. Please provide position title and description of duties, percentage of time dedicated to each duties, and years of experience.)		
Current Employment:		Position Title:
Description of Primary Duties:		
Description of Secondary Duties:		
Professional Organization Membership(s) (Show positions held and dates of memberships):		
References (Requires two members of TWGFEX)		
Print Name: _____	Print Name: _____	
Signature: _____	Signature: _____	
Attach your curriculum vitae and a letter from your agency acknowledging their approval for membership.		
Print Name: _____	Signature: _____	Date: / /